## FORM D



# **UNITED STATES** SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

SEC	USE ON	ILY
Prefix		Serial
DAT	E RECEIV	ED

OMB APPROVAL

Estimated average burden hours per response . . . 16.00

3235-0076

May 31, 2005

OMB Number:

Expires:

890805

### UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  2004 William Morris Agency, Inc. Class B Common Stock Offering of 39,000 Shares	RECD S.E.O.
	DEC 2 3 2004
Type of Filing: New Filing Amendment  A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	1088
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
William Morris Agency, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)  Telephone 1  151 El Camino Dr., Beverly Hills, California 90212  (310) 859-	Number (Including Area Code) 4208
Address of Principal Business Operations (Number and Street, City, State, Zip Code)  (if different from Executive Offices) SAME  Telephone 1  (310) 859-	Number (Including Area Code) -4208
Brief Description of Business Entertainment artists' representation company; also engaged in ownership a	and operation of real estate.
Type of Business Organization	
Actual or Estimated Date of Incorporation or Organization:    Month   Year	Estimated  IAN 0.5 2005  THOMSON
GENERAL INSTRUCTIONS	FINANCIAL
Federal:	

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offer-ing, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemp-tion, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

la-763334

	A. BASIC IDENTIF	ICATION DATA		
2. Enter the information requested for the follow	wing:			
• Each promoter of the issuer, if the issuer has	-	• •		
<ul> <li>Each beneficial owner having the power t securities of the issuer;</li> </ul>	o vote or dispose, or	direct the vote or dispos	sition of, 10% or	r more of a class of equity
Each executive officer and director of corp.		orporate general and man	naging partners o	of partnership issuers; and
Each general and managing partner of partn	ership issuers.			
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Broka	aw, Norman R.			
Business or Residence Address (Number and 151 El Camino Drive, Beverly Hills, CA 90212	Street, City, State, Zi	ip Code)		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Gluck	k, Suzanne			,
Business or Residence Address (Number and	Street, City, State, Zi	ip Code)		
1325 Avenue of the Americas, New York, New York	rk 10019			
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	□ Director     □ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Griffi	n, James M.		·	
`	Street, City, State, Zi	ip Code)		
151 El Camino Drive, Beverly Hills, CA 90212	7	57		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Gross	light, Peter			
•	Street, City, State, Zi	ip Code)		
151 El Camino Drive, Beverly Hills, CA 90212			<del> </del>	
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Fogel	man, John M.			
Business or Residence Address (Number and 151 El Camino Drive, Beverly Hills, CA 90212	Street, City, State, Zi	ip Code)		
Check Box(es) that Apply:  Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Hask	ell, III, Samuel B.			
Business or Residence Address (Number and 151 El Camino Drive, Beverly Hills, CA 90212	Street, City, State, Zi	ip Code		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	⊠ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Itkin	, Mark			
Business or Residence Address (Number and 151 El Camino Drive, Beverly Hills, CA 90212	Street, City, State, Z	ip Code)		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Kran	n. Steven H.			
<del></del>	Street, City, State, Z	ip Code)		
151 El Camino Drive, Beverly Hills, CA 90212		-F = = = = = = = = = = = = = = = = = = =		

Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first,	if individual) M	lass, John			
Business or Residence Addr	ess (Number	and Street, City, State, 2	Zip Code)		
151 El Camino Drive, Beverly	y Hills, CA 90212				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first,	if individual) Ro	osenberg, Richard A.			
Business or Residence Addr	ess (Number	and Street, City, State, 2	Zip Code)		
151 El Camino Drive, Beverly	y Hills, CA 90212	<u> </u>			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first,	if individual) Si	impson, Mike			
Business or Residence Addr 151 El Camino Drive, Beverly		and Street, City, State, 2	Zip Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		□ Director	General and/or Managing Partner
Full Name (Last name first,	if individual) Si	tein, Cara			
Business or Residence Addr 1325 Avenue of the Americas	•	and Street, City, State, 2 York 10019	Zip Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first,	if individual) W	Valsh, Jennifer Rudolp	h		
Business or Residence Addr 1325 Avenue of the Americas		and Street, City, State, 2 York 10019	Zip Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner		□ Director	General and/or Managing Partner
Full Name (Last name first,	if individual) W	Veintraub, Irving J.			
Business or Residence Addr 151 El Camino Drive, Beverly	•	and Street, City, State, 2	Zip Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first,	if individual) W	Viatt, James A.			
Business or Residence Addr	ess (Number	and Street, City, State, 2	Zip Code)		
151 El Camino Drive, Beverly	y Hills, CA 90212	<u> </u>			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	□ Director     □ Director	General and/or Managing Partner
Full Name (Last name first,	if individual) V	Virtschafter, David Z.			
Business or Residence Addr	ress (Number	and Street, City, State, 2	Zip Code)		
151 El Camino Drive, Beverly	y Hills, CA 90212				

					B. INF	ORMATI	ON ABO	UT OFFE	RING					
							1						Yes	
I. Has	the issuer	sold, or d								g:/	• • • • • • • • • • • • • • • • • • • •		🔲	$\boxtimes$
2 Who	at is the m	inimum in		Answer als				-				*******************	\$100	nn
Z. WIII	it is the in	iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	ivestificiti	mat will b	e accepted	i iioiii aiiy	marvidua	H	•••••		• • • • • • • • • • • • • • • • • • • •	***************************************	3 <u>100.</u> Yes	
3. Doe	s the offer	ing permi	t joint owi	nership of	a single u	nit?								$\boxtimes$
sion to b list t or d	or similar e listed is the name e ealer, you	r remuners an assoc of the bro may set fo	ation for s iated perso ker or des orth the in	or each pe olicitation on or ager aler. If m formation	of purchant of a brown	isers in co oker or de five (5) pe	nnection valer registers	vith sales of tered with be listed a	of securities the SEC	es in the o and/or wi	offering. It ith a state	f a person or states,		
Full Na	me (Last n	ame first,	if individ	ual)	N/A									
Busines	s or Resid	ence Add	ress (Num	ber and St	reet, City,	State, Zip	Code)							
Name o	f Associat	ed Broker	or Dealer										· · · · ·	ı
States in	n Which P	erson List	ed Has So	olicited or	Intends to	Solicit Pu	ırchasers							
(Cho	eck "All S	tates" or c	check indi	vidual Stat	es)								All St	tates
[AL]	[AK] [IN]	[AZ]	[AR] [KS]	[CA] [KY]	[CO]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL]	[GA]	[HI]	[ID]		
[MT]	[NE]	[IA] [NV]	[NH]	[NJ]	[LA] [NM]	[NY]	[NC]	[ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full Na	me (Last r	ame first,	if individ	ual) N/A								· · · · · · · · · · · · · · · · · · ·		
						,								
Busines	s or Resid	ence Add	ress (Num	ber and St	reet, City,	State, Zip	Code)							
										,				
Name o	f Associat	ed Broker	or Dealer	•										
States in	Which P	erson List	ted Has Sc	licited or	Intends to	Solicit Pu	ırchasers							
(Ch	eck "All S	tates" or o	check indi	vidual Stat	tes)		•••••••						All S	tates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	$\frac{[TX]}{\text{ual})  N/A}$	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
ruii Iva	me (Last i	iame msi,	H IIIQIVIQ	uai) 147A										
Busines	s or Resid	ence Add	ress (Num	ber and St	reet, City,	State, Zip	Code)							
Name o	f Associat	ed Broker	or Dealer				······································						<del>,</del>	
Charle	. 1370.1 1 2			11-14-3	Internal of	C-1: '- P	1		<del>.</del>					
				olicited or									~	
,				vidual Stat	•							· <del></del>	All S	tates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
		Aggregate	Amo	ount Already
	Type of Security	Offering Price		Sold
	Debt	\$ 0	\$	0
	Equity	\$ 39,000	\$	39,000
	☐ Preferred			
	Convertible Securities (including warrants)	\$ 0	\$	0
	Partnership Interests	\$ 0	\$	0
	Other (Class II Units)	\$ 0	\$	0
	Total	\$ 39,000	\$	39,000
	Answer also in Appendix, Column 3, if filing under ULOE			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases of the total lines. Enter "0" if answer is "none" or "zero."	,		
	Investors	Number of Purchasers	Do	Aggregate ollar Amount
	Accredited Investors	15	\$	39,000
	Non-accredited Investors	0	\$	0
	Total (for filings under Rule 504 only)			
	Answer also in Appendix, Column 4, if filing under ULOE			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.			
		Type of	Γ	Dollar Amount
	Type of Offering	Security		Sold
	Rule 505	 	\$	
	Regulation A	 	\$	
	Total			;
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Excluded amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fee	 		<u>_</u> ]\$
	Printing and Engraving Costs	 		<b>□</b> \$
	Legal Fees	 		<b>⊠</b> \$4,000
	Accounting Fees			
	Engineering Fees		_	
	Sales Commissions (specify finders' fees separately)		_	 _]s
	Other Expenses (identify):			s
	Other Expenses (identify)			

	<b>⊠\$4,000</b>
ENSES AND USE OF PROCEED	S
e to '4.a.	\$35,000
d or se is total th in	
Payment to Officers, Directors, &	Payments To Others
[] \$	□ \$
	<b>\$</b>
s	<b>\$</b>
S	□ \$
	□ \$
\$	□ <b>\$</b>
\$	⊠ \$ <u>35,000</u>
\$	<b>S</b>
	□ \$ □ \$ 35,000
<del></del>	□ 3 35,000     □ 3 35,000     □ 3 35,000     □ 3 35,000     □ 3 35,000     □ 3 35,000     □ 3 35,000     □ 3 35,000     □ 3 35,000     □ 3 35,000     □ 3 35,000     □ 3 35,000     □ 3 35,000     □ 3 35,000     □ 3 35,000     □ 3 35,000     □ 3 3 35,000     □ 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
	△ 3 <u>33,000</u>
nerson. If this notice is filed under	Pula 505 tha
curities and Exchange Commission pursuant to paragraph (b)(2) of Rule	, upon written
Date: December 20	2004
	-
hief Financial Officer	
	e to 4.a.  d or se is total h in  Payment to Officers, Directors, & Affiliates  \$

ATTENTION
Intentional misstatements or omissions of facts constitute federal criminal violations. (See 18 U.S.C. 1001.)